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Approved for use through 10/31/2002. OMB 0651-0032
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UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>	Attorney Docket No.	022727-0068
	First Inventor	Randall I. Grimes
	Title	DEVICES AND METHODS FOR, etc.
	Express Mail Label No.	EL835839928US

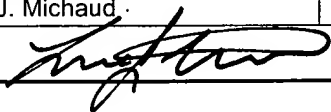
APPLICATION ELEMENTS <i>See MPEP chapter 600 concerning utility patent application contents.</i>	ADDRESS TO: Box Patent Application Commissioner for Patents Washington, DC 20231
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <small>(Submit an original, and a duplicate for fee processing)</small>	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
2. <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.	8. Nucleotide and/or Amino Acid Sequence Submission <small>(if applicable, all necessary)</small>
3. <input checked="" type="checkbox"/> Specification [Total Pages 27] <small>(preferred arrangement set forth below)</small> <ul style="list-style-type: none">- Descriptive title of the invention- Cross Reference to Related Applications- Statement Regarding Fed sponsored R & D- Reference to sequence listing, a table, or a computer program listing appendix- Background of the Invention- Brief Summary of the Invention- Brief Description of the Drawings (if filed)- Detailed Description- Claim(s)- Abstract of the Disclosure	a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies
4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) (7 sheets, 23 figs.)	ACCOMPANYING APPLICATIONS PARTS
5. Oath or Declaration 4 <small>(Total Pages)</small> <ul style="list-style-type: none">a. <input type="checkbox"/> Newly executed (original or copy)b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <small>(for continuation/divisional with Box 18 completed)</small>i. <input type="checkbox"/> DELETION OF INVENTOR(S) <small>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</small>	9. <input checked="" type="checkbox"/> Assignment Papers (copy from prior application)
6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76	10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of <small>(when there is an assignee) Attorney</small>
	11. <input type="checkbox"/> English Translation Document (if applicable)
	12. <input type="checkbox"/> Information Disclosure <input type="checkbox"/> Copies of IDS Statement (IDS)/PTO-1449 Citations
	13. <input checked="" type="checkbox"/> Preliminary Amendment
	14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <small>(Should be specifically itemized)</small>
	15. <input type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small>
	16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
	17. <input type="checkbox"/> Other:

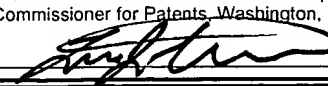
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☒ Divisional ☐ Continuation-in-part (CIP) of prior application No.: 09/417,945
Prior application information: Examiner U. Ho Group / Art Unit: 3731

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS					
<input checked="" type="checkbox"/> Customer Number or Bar Code Label		021125		or <input type="checkbox"/> Correspondence address below	
Name	NUTTER, MCCLENNEN & FISH, LLP Lisa J. Michaud				
Address	One International Place				
City	Boston	State	MA	Zip Code	02110-2699
Country	US	Telephone	(617) 439-2550	Fax	(617) 310-9550

Name (Print/Type)	Lisa J. Michaud	Registration No. (Attorney/Agent)	44,238
Signature		Date	October 17, 2001

Transmittal-New Utility Patent Application	
I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EL835839928US, in an envelope addressed to: Box Patent Application, Commissioner for Patents, Washington, DC 20231, on the date shown below.	
Dated: October 17, 2001	Signature:  (Lisa J. Michaud)

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FEE TRANSMITTAL for FY 2002		Complete if Known																																																																																																																																																																																															
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ADDITIONAL FEES</p> <table border="1" style="width: 100%; border-collapse: collapse; font-size: 0.8em;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>105</td><td>130</td><td>205</td><td>65</td><td>Surcharge - late filing fee or oath</td><td></td></tr> <tr><td>127</td><td>50</td><td>227</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet.</td><td></td></tr> <tr><td>139</td><td>130</td><td>139</td><td>130</td><td>Non-English specification</td><td></td></tr> <tr><td>147</td><td>2,520</td><td>147</td><td>2,520</td><td>For filing a request for <i>ex parte</i> reexamination</td><td></td></tr> <tr><td>112</td><td>920*</td><td>112</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td><td></td></tr> <tr><td>113</td><td>1,840*</td><td>113</td><td>1,840*</td><td>Requesting publication of SIR after Examiner action</td><td></td></tr> <tr><td>115</td><td>110</td><td>215</td><td>55</td><td>Extension for reply within first month</td><td></td></tr> <tr><td>116</td><td>400</td><td>216</td><td>200</td><td>Extension for reply within second month</td><td></td></tr> <tr><td>117</td><td>920</td><td>217</td><td>460</td><td>Extension for reply within third month</td><td></td></tr> <tr><td>118</td><td>1,440</td><td>218</td><td>720</td><td>Extension for reply within fourth month</td><td></td></tr> <tr><td>128</td><td>1,960</td><td>228</td><td>980</td><td>Extension for reply within fifth month</td><td></td></tr> <tr><td>119</td><td>320</td><td>219</td><td>160</td><td>Notice of Appeal</td><td></td></tr> <tr><td>120</td><td>320</td><td>220</td><td>160</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>121</td><td>280</td><td>221</td><td>140</td><td>Request for oral hearing</td><td></td></tr> <tr><td>138</td><td>1,510</td><td>138</td><td>1,510</td><td>Petition to institute a public use proceeding</td><td></td></tr> <tr><td>140</td><td>110</td><td>240</td><td>55</td><td>Petition to revive - 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Name (print/type) Lisa J. Michaud		Registration No. (Attorney/Agent) 44,238	Complete (if applicable) Telephone (617) 439-2550																																																																																																																																																																																														
Signature		Date	October 17, 2001																																																																																																																																																																																														

Fee Transmittal	
I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EL835839928US, in an envelope addressed to: Box Patent Application, Commissioner for Patents, Washington, DC 20231, on the date shown below.	
Dated: October 17, 2001	Signature: (Lisa J. Michaud)

21-1999

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To the Assistant Commi
or a copy thereof.

Please record the attached original documents

1. Name of conveying party(ies):
Randall Y. Grimes

2. Name and address of receiving party(ies):

Name: Massachusetts General Hospital
Street Address: 55 Fruit Street
City: Boston
State: MA Zip: 02114

Name: The Georgia Tech Research Corporation
Street Address: 400 Tenth Street
City: Atlanta
State: GA Zip: 30332-0415

Additional name(s) of conveying party(ies) attached?

☐ Yes ☒ No

Additional name(s) & address(es) attached?

☐ Yes ☒ No

3. Nature of conveyance:

☒ Assignment ☐ Security Agreement
☐ Merger ☐ Change of Name
☐ Other:

Execution Date: 10/1/99

4. Application number(s) or patent number(s): (If this document is being filed together with a new application, the execution date of the application is: 10/1/99)

A. Patent Application No(s):
Not Yet Assigned

B. Patent No(s):

Additional numbers attached? ☐ Yes ☒ No

5. Name and address of party to whom correspondence concerning document should be mailed:

Atty. Name: William C. Geary III
Firm Name: Nutter, McClennen & Fish, LLP
Street Address: One International Place
City/State: Boston, MA
Zip Code: 02110-2699

6. Total number of applications and patents involved? 1

7. Total fee (37 CFR 3.41): \$40
☒ Fee Enclosed
☐ Charge Deposit Account No. 141449
☒ The Commissioner is hereby authorized to charge underpayment/credit overpayment to Deposit Account No. 141449.

(Attach duplicate copy of this page if paying fees by Deposit Account)

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9. Statement and signature (To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document.)

William C. Geary III
Name of Attorney

Signature

Date

Total number of pages including cover sheet: 3